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ABSTRACT

Efforts toward integration and eclecticism in counseling and psychotherapy reflect continuing interest in systematically blending theoretical commonalties and eclectically using a variety of techniques across different schools of therapy in the hope of achieving a constituent working model that pools the strengths of different theories and techniques. The purposes of this paper are: (1) to outline the philosophical and theoretical principles on which the higher-order integrative conceptualization of relationship-centered counseling is based; and (2) to highlight the joint interaction of relational and technical components in light of recent counseling process and client change research. First, the major principles of relationship-centered counseling are developed. Second the philosophical basis for integrating the in-depth humanistic/relational ground and purpose of counseling with the multiple human and technical operations that constitute the counseling process in action are presented. Finally, the paper discusses relevant key findings from a broad range of counseling process and outcome research that elucidate how the relationship-centered perspective undergirds the joint interaction of relationship and task/technique elements in counseling practice. Contains 92 references. (JBJ)

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Relationship-Centered Counseling: The Integrative Interaction of Relationship and Technique[1]

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Efforts toward integration and eclecticism in counseling and psychotherapy reflect continuing interest in systematically blending theoretical commonalities and eclectically using a variety of techniques across different schools of therapy--all in the hope of achieving a constituent working model that pools the strength of different theories and techniques. Approaches to the integration follow several different routes (Arkowitz, 1992; Mahrer, 1989; Norcross & Newman, 1992). These include technical eclecticism, a largely atheoretical but systematic use of a variety of techniques based on particular client needs (Lazarus & Beutler, 1993); theoretical integration or integrative eclecticism, which attempts a conceptual, organic integration of two or more theories (Messer, 1992; Norcross & Newman, 1992); and common factors, which attempts to identify core ingredients shared by all therapists and therapies (Arkowitz, 1993; Frank, 1982).

The empirical basis for integration is found in cumulative research findings indicating that non-specific factors generally common to all schools of therapy contribute substantially to therapeutic effectiveness and that for most client problems there is little difference in effectiveness among different theoretical approaches (Kazdin, 1986). These research conclusions are matched by the clinical preference of the majority of therapists for an eclectic rather than a single theory approach in practice (Norcross & Newman, 1992). Integrative models do not preclude the ongoing development of specific theoretical approaches. Single theory approaches provide rich elaborations of specific perspectives on client problems and counseling process (Kelly, 1994) and often serve to provide therapists and theorists with firm grounding in one system while allowing the assimilation of other perspectives and practices (Messer, 1992). But the weight of evidence and experience indicate that integrative and eclectic approaches--explicitly or implicitly implemented--are more likely to capture

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effectively the complex, interwoven web of counselor-client dynamics and interactions.

Considerable theory and research conceive the diverse operations of the counseling process as generally falling into two major domains: the relationship domain and the technical/task domain (see, e. g., Elliott & Wexler, 1994; Greenberg, Rice, & Elliott, 1993; Orlinsky & Howard, 1977; Stiles, Shapiro, & Firth-Cozens, 1988). I have argued elsewhere (Kelly, 1994) that these two major domains of therapy divide along lines similar to the two major orientations or cultures of psychology, namely the humanistic and scientific (Kimble, 1984). In this broader perspective one can speak of the relational/humanistic/artistic domain and the technical/task/scientific domain, with the former emphasizing primarily humanistic values such as indeterminism, idiographic laws, naturalistic/qualitative research, holism, and intuition, and the latter emphasizing primarily scientific values like determinism, empirical observation, nomothetic laws, and reductionism.

In counseling and psychotherapy, the relational/humanistic component of counseling is constituted primarily by the non-specific affective and attitudinal factors bonding the counselor and client in the therapeutic relationship or therapeutic alliance (Gaston, 1990; Horvath & Greenberg, 1989). These therapeutic relationship factors are non-specific in the sense that are typically found in effective counseling across all approaches to and techniques of counseling. There is impressive research evidence that the therapeutic relationship, conceptualized in several diverse but highly similar ways, contributes significantly and substantially to positive therapeutic outcome (Luborsky, Crits-Christoph, Mintz, & Auerbach, 1988; Marziali & Alexander, 1991; Orlinsky & Howard, 1986; Sexton & Whiston, 1994; Wolfe & Goldfried, 1988). The technical/scientific domain consists of all the therapeutic tasks, techniques, and tools that counselors initiate and use to achieve more or less specific assessment and treatment objectives. Such tasks and techniques often have a primary association, at least in theory, with particular theoretical approaches to counseling (e. g., identifying and labeling self-defeating ways of thinking in cognitive therapy, systematic desensitization in behavioral therapy, empty chair techniques in gestalt therapy). I propose that the major direction for integration in counseling should involve a conceptual and practical synthesizing of these two domains. I have described elsewhere (Kelly, 1994) a relationship-centered perspective and approach to achieve this integrative goal. It is the purpose of this paper to extend my proposal for relationship-centered counseling.

There is widespread recognition that some admixture of relationship and tasks/techniques are necessary for most effective therapy and therapy integration. (see, e. g., Arnkoff, 1983; Beutler & Consoli, 1992; Elliott, 1985; Greenberg, Rice, & Elliott, 1993; Hill, Helms, Spiegel, & Tichenor, 1988; Orlinsky & Howard, 1977; Safran, 1990; Safran & Segal, 1990; Stiles, Shapiro, & Firth-Cozens, 1988). However, a significant problem in achieving greater progress toward integration is the lack of a higher order conceptualization that will overcome three obstacles in particular. These obstacles are (a) the persistent reluctance in theory and practice of those on the humanistic/relationship side (which is the side that I mostly identify with) to accept and use technical interventions within an authentic

humanistic approach (Messer, 1992); (b) the persistent tendency of those on the technical, largely cognitive-behavioral side to give a more or less passing nod to the importance of relationship but proceed to research and describe, if not always practice, counseling and psychotherapy as a largely technical endeavor (see, Kelly, 1994, for discussion of these tendencies); and (c) the too frequent split in research (although not always in practice; see, e. g., Friedlander, 1992; Hill, 1992a, 1992b; Martin, 1992b) between applications of an epistemology based strictly on empirical observations and epistemologies incorporating reasonably reflective, meta-empirical explanations of reality as it is humanly experienced and constructed. It would be terribly naive to claim that these serious, longstanding disputes can be swept away or easily resolved. Rather, as a step toward overcoming these obstacles, I propose a higher order conceptualization, termed relationship-centered counseling, that focuses specifically on a full, systemic incorporation of the humanistic and technical components within a comprehensive empirical and meta-empirical perspective. The intended effect of this higher order integration is to provide a firm theoretical foundation for the integration of specific concepts and the eclectic use of a wide variety of techniques across both humanistically and technically oriented approaches.

Specifically, the purpose of this paper is twofold. The first is to outline the philosophical and theoretical principles on which the higher-order integrative conceptualization of relationship-centered counseling is based. The second is to highlight the joint interaction of relational and technical components in the light of recent counseling process and client change research. In developing these purposes, first, I will set forth the major principles of relationship-centered counseling in propositional form. Second, I will present the philosophical basis for integrating the in-depth humanistic/relational ground and purpose of counseling with the multiple human and technical operations that constitute the counseling process in action. Third, I will discuss relevant key findings from a broad range of counseling process and outcome research that elucidate how the a relationship-centered perspective undergirds the joint interaction of relationship and task/technique elements in counseling practice.

Relationship-Centered Counseling: Guiding Characteristics and Major Propositions

The major elements of relationship-centered counseling may be summarized in the form of three guiding characteristics and seven propositions of fundamental principles. I discuss elsewhere (Kelly, 1994) full argumentation for these points, which space precludes presenting here.

Relationship-centered counseling has three guiding characteristics: (a) It focuses specifically on integration of the humanistic/relational/artistic domain of counseling and the empirical/scientific/technical domain; (b) it proposes the primacy of the relational/humanistic dimension of counseling and the secondary role of techniques as the instrumental extension of the therapeutic relationship; and (c) it proposes a description of therapeutic practice that

legitimately incorporates a wide range of technical operations within a predominantly humanistic, relational framework.

The fundamental principles of relationship-centered counseling can be summarized in the form of seven propositions. As a preliminary, I note briefly the philosophical foundations undergirding the these propositions. In terms of ontology, I am a critical realist (Foster, 1987; Martin, 1994; Popper, 1956/1983); that is, simply put, I affirm the objective reality of the world both as including human mental activity (our minds) and as constituted of reality independent of our minds. In terms of epistemology I am reasonably persuaded that our way of knowing functions comprehensively in both an empirical and meta-empirical manner. Moreover, the progressively refined validation of human knowing vis-a-vis reality in which we participate requires ongoing critical observation and analysis in both empirical and meta-empirical modes. A corollary to these proposition is the affirmation of human freedom, agency, and meaningfulness within an open sphere of predictive causality.

My propositions are as follows.

1. The primary, core purpose of counseling and psychotherapy across all specific objectives is relationally oriented humanization, that is, the enhanced humanity of clients understood according to the distinctive in-depth qualities of being and becoming human. I have discussed at length elsewhere (Kelly, 1994) these core in-depth qualities, as indicated by philosophical reflection and psychological inquiry across many centuries, as reflective self-consciousness, intrinsic freedom, purposefulness or intentionality, social relatedness, ethical responsibility, and transcendent meaningfulness.

2. The primary ontological ground of humanness is inherently relational. That is to say, individual, personal subjectivity is grounded in relationality--the tripartite "I-You-He/She" described by the French philosopher Francis Jacques (1982/1991)--and the individual person develops and functions within relationship. Thus, in-depth humanness as well as the developmental trajectory of personal humanization is inherently relational.

3. A corollary of the first two propositions is that the therapeutic relationship is the primary, integrative core of counseling and psychotherapy. The therapeutic "relationship constitutes a comprehensive, in-depth therapeutic field, forming in itself a human and humanizing bond between the counselor and client and serving as the interpersonal, psychosocial ground for the integration of technical expertise within the totality of the counseling" endeavor (Kelly, 1994, p. 121). This view is similar to and extends Butler and Strupp's (1986) view that "psychotherapy is defined as the systematic use of a human relationship for therapeutic purposes" (p. 36). All the processes of counseling receive their healing, developmental depth in the humanistic, humanizing power of the therapeutic relationship, while at the same time contributing to and extending their depth in specific acts of healing change. This brings us to the fourth proposition.

4. The fourth proposition has two parts. (a) Technical expertise constitutes the secondary, instrumental component of counseling, and (b) therapeutic relationship does not exist apart from technical expertise. The therapeutic relationship extends its humanizing potential by way of technical expertise. In this regard the therapeutic endeavor is informed by the aesthetic principle that the range and quality of an artist's technical expertise is indispensable to the creative human passion at the heart of authentic artistic expression (Norman, 1972)--think, for example, of Mozart, Rembrandt, or Shakespeare. Creative passion is the soul of art, but without technical expertise this passion is dissipated and unformed (Barth, 1984). So too, humanizing relationship is the vitalizing core of counseling, but without well-informed technical expertise relationship remains largely mute and unfulfilled in its humanizing purpose.

5. The in-depth, operational effect of the primacy of humanizing relationship in counseling is the inherent mutuality and reciprocity of the counselor-client relationship--an element stressed particularly in alliance conceptualizations of the relationship (Horvath & Greenberg, 1989; Horvath & Symonds, 1991; but see Bachelor, 1995, for contrary evidence). Carl Rogers (1986/1989) once wrote that the therapist "becomes a companion to the client in [the] journey toward the core of the self" (p. 138). In relationship-centered counseling, I would re-construe therapy not as a journey toward the core of the self but as "a journey in and toward a deepening counselor-counseling communion" (Kelly, 1994, p. 168). In other words, "the fundamental focus of counseling is not the self center but the relational center. For it is in the relational center, not in the self enter, that the full human resources for personal [self-development] are to be found" (Kelly, 1994, p. 168).

6. The operational, practical effect of this relational focus is that the core facilitative conditions of the relationship must be construed relationally as embracing both the counselor and client. For example, empathy is not just entering the client's world (although that's a very important thing to do). But in counseling empathy means entering the world of the client as it progressively comes to include the counselor, especially as a resource for the client's growth and always for the client's welfare. Note that in this perspective, counselor initiatives (e. g., counselor generated tasks and techniques) are not intrusions from outside the client but resources from within the ever-deepening and expanding shared relational world of the client and the counselor. Another example of facilitative relationality is therapeutic genuineness, which I regard comprehensively as both inner congruence and expressive honesty. Therapeutic genuineness, which relationally involves both counselor and client, establishes the fundamental direction of the therapeutic relationship as always moving toward a non-distorted reality orientation, despite many in-process occurrences of distortion (including transference). In this regard, I do not concur with the distinction between a real relationship and transference relationship as distinct components of the therapeutic relationship (Gelso, 1985, 1994; Sexton & Whiston, 1994). I understand therapeutic genuineness to mean that the therapeutic relationship, precisely as it is therapeutic, is inherently guided by a reality-oriented motive and progressively moves the counselor and client in relationship toward non-distortion, clarity, and awareness in relationship and self.

7. Finally, I propose that the whole range of cognitive and behavioral techniques that research and theory identify as more or less effective across a variety of client problems are legitimate expressions of the technical expertise that concretely extends the humanizing force of the counseling relationship. This position is justifiable in theory as well as practice because most if not all techniques, despite their traditional association with a particular theory, do not depend on nor confirm in any absolute sense the particular theory with which the technique is usually connected. That is to say, techniques are eclectically transportable (Beutler & Consoli, 1992; Lazarus, 1992) despite theoretical inconsistencies that underlie techniques. The essential point for relationship-centered counseling is not whether or not to use techniques. It is rather the implementation of techniques consistent with the fundamental humanizing purpose of counseling--that is to say, always as instrumental activities within the in-depth humanizing relational field that affectively and effectively bonds the counselor and client in the task of positive change.

Ontological Ground and Teleological Force of Counseling Process

When the basic propositions of relationship-centered counseling are operationalized within the multiple intrapersonal and interpersonal events of the concrete counseling process, the therapeutic relationship emerges as having three major aspects relative to the total counseling process: ontological, teleological, and process. I will discuss each of these in turn. I will finally elaborate on the process aspect in terms of identifying ways that relationship and technique jointly interact in the counseling process.

Ontological Aspect of Counseling

First is the ontological aspect, which signifies that therapeutic relationship--and through the therapeutic relationship counseling itself--is ontologically grounded in the fundamentally distinctive qualities of relational humanness. That is to say, therapeutic relationship is inherently defined by the in-depth qualities of reflective self-consciousness, intrinsic freedom, purposefulness or intentionality, social relatedness, ethical responsibility, and transcendent meaningfulness. In this light, therapeutic relationship is defined in the first instance not by cataloging and categorizing the multiplicity of interactional events that occur between the counselor and client but rather by the humanizing values and beliefs that incorporate and foster the development of the fundamentally distinctive qualities of relational humanness. The therapeutic relationship infuses the total counseling endeavor with a prevailing humanistic intention that gives a humanizing direction to specific process intentions (see also Orlinksy & Howard's [1986] evidence on the structural regularity of the therapeutic relationship "as vivid, as mutually receptive and sensitively collaborative, as liberal and open, and a warmly and mutually affirming" [p. 493]).

As can be seen from this, therapeutic relationship is not a neutral, non-directional, or content-empty bondedness between the counselor and client. Therapeutic relationship is not

any interaction that occurs between the counselor and client, not any affective process. Therapeutic relationship is a special kind of relationship that needs to be distinguished from other forms of interactions that occur in the counseling process. Therapeutic relationship is distinguished from other relationships as music is distinguished from any non-musical sound, plain noise, or cacophony. Looked at this way, therapeutic relationship certainly takes many different forms but it is not identical with nor defined by every interaction that occurs in the counseling process.

I acknowledge that it is not a simple matter to set with total clarity the defining boundaries of therapeutic relationship or to distinguish in practice between expressions of therapeutic relationship and other process interactions. But to think of therapeutic relationship without a defining humanistic ground and purpose is meaningless. Therapeutic relationship is not just any relationship expression that happens to occur between a counselor and client in the context of counseling (a confusion that occurs in solely descriptive approaches to understanding relationship in counseling). Therapeutic relationship, precisely as it is therapeutic, has an inherently benevolent, humanistic purpose. And although it may be difficult to pin that down, it is of no help to run away from it in or to expect that it can be solved by solely empirical efforts to construct it from multiple value-free observations. J. Martin, W. Martin, and Slemon (1989) present a vignette that is instructive in this regard. They describe how a man's abrupt departure from other guests at a dining table has many possible underlying meanings. As they note, it is highly unlikely that we can establish a predictive understanding of underlying meanings in such ambiguous circumstances through strictly empirical observations of behavioral patterns; that is to say, no amount of information about intention-behavior patterns based solely on empirical observations is ever likely to yield certain knowledge about human intentions underlying particular behaviors. In ambiguous cases like this what a counselor primarily needs is a basic relational-humanistic intention (i. e., prevailing intention) that leads to a caring and content-tentative empathic reaction--in this case that the departing man has experienced something that has bothered him enough to move him to an abrupt action generally considered inconsistent with social expectations at the moment. It is from such a humanistically relational base that the counselor can call upon a knowledge of typical intention-behavior response patterns and other empirical based knowledge--as well as on-going dialogue with the client--to effectively develop a more specific understanding of the client's intentions and actions. Note that it is the basic humanistic intention that primarily informs the counselor's initial response and continues to inform subsequent, more concrete responses.

We can of course expect the counseling process to be a mixture of therapeutic relationship and other kinds of interactions. Moreover, therapeutic relationship, although defined in principle by its humanizing characteristics, exists only in idiosyncratic contexts that give final concrete shape as it is expressed. What is a therapeutic relationship between a counselor and client in one set of circumstances and at one moment may be non-therapeutic in other circumstances and at other moments. Across the great complexity of counselor-client interaction, it is the foundational set of relationally humanistic values and beliefs

expressed in a prevailing humanistic intention that has the inherent potential (and alone has the potential) to define any specific process interaction as therapeutic. All else is non-therapeutic or countertherapeutic, or in the case of techniques, is an instrumental extension of therapeutic relationship. It might be said that counseling is loaded with interpersonal interactions, but not every interpersonal interaction (e. g., the specifically distorted aspect of a transference interaction) is an expression of therapeutic relationship.

Teleological Aspect of Counseling

I turn now to the second aspect of therapeutic relationship, namely the teleological aspect. The teleological aspect of counseling signifies that therapeutic relationship--and through the therapeutic relationship counseling itself--is inherently oriented toward enhanced relational humanness. This means that the distinctive qualities of humanness that define the ontological ground of the therapeutic relationship also define the overarching purposes that give therapeutic direction to counseling.

The counseling process is oriented toward several levels of goals and outcomes (immediate, intermediate, final) (Greenberg, 1986a). The therapeutic force of any level of outcome lies ultimately in how well the attainment of an outcome goal enhances the distinctive qualities of being and becoming human. This means that the meaning and value of a specific goal/outcome does not inhere entirely in the specific outcome itself. Rather, meaning and value are more deeply and comprehensively established by the inherent potential of a specific goal to enhance the client's capacity for reflective self-consciousness (personal knowledge), deepened awareness of personal free choice, a clarified sense of purposefulness, an enlarged capability for social relatedness, an increased commitment to ethical responsibility, and an openness to transcendent meaningfulness.

Clearly my position here is that not any change that alleviates a complaint is in the true sense of the term a therapeutic, that is, humanizing, change. But if this is the case, then by what standards are we to evaluate change itself as being genuinely therapeutic? It is at this point that we are forced to struggle with the notion of fundamental--essential and universal, if you will--distinctive qualities of being and becoming human. To speak of essential, universal qualities of humanness is not to negate the crucial contextual (cultural, societal, familial), developmental/constructive, and idiosyncratic/individual characteristics of humanness (Kelly, 1994). It is rather to affirm a deep and broad ontological ground for our humanity. It is to affirm for our humanness the "both/and" rather than the "either/or" of grounded ontology and contextual constructivism. In attempting to identify the essential grounding qualities of humanness I recognize that there are multiple, diverse strands of thought in philosophy and the social and behavioral sciences (not to mention folk wisdom) that address this issue. The qualities of humanness that I identify as distinctively essential to in-depth humanness are certainly open to dialogue, refinement, and reformulation. These qualities may be formulated in different terms, and the precise number and nature of such qualities are not by any means beyond dispute. However, I am reasonably persuaded by

philosophical and theoretical inquiry, empirical research, and experience that it is in the realm of the qualities noted above, or of some quite similar, that the ontological ground and purpose of being human are found. This being so, all the goals and subgoals of counseling become authentically therapeutic insofar as they incorporate and achieve some degree of advance in these qualities.

In this ontological/teleological perspective, the therapeutic relationship is seen as the pervasive, primary therapeutic component of counseling, albeit in different degrees of expressiveness and different modalities. In this respect, the therapeutic relationship acts as a prevailing therapeutic intention bearing the benevolent values and beliefs of authentic humanization for the client. From this in-depth purposeful perspective we now turn to the concrete, manifold operations of the counseling process.

Process Aspect of Counseling

The third aspect of therapeutic relationship is the process aspect, which signifies that the fundamental therapeutic relationship is expressed in manifold process events--some directly relational in operation and many technical in operation --including such on-going process events as immediate intentions, response modes, specific therapeutic tasks, and technical interventions (Hill & Corbett, 1993). A consideration of therapeutic relationship as expressed in process events brings us into the concrete, experiential arena of counselor-client interaction, including the field of research on counseling process and outcome and client change. This now large and growing body of research, much of it quantitative-empirical and some qualitative, attempts to catalogue process events and discover cognitive-affective-behavioral patterns that can explain and predict how counseling does or does not work for the benefit of the client. The propositions for relationship-centered counseling are derived in part from research demonstrating the substantial importance of the therapeutic relationship and the relative effectiveness of specific techniques. However, they are formulated in broad terms that also rely significantly on philosophical and meta-empirical reasoning. It is now necessary to examine the relationship-centered proposal more closely in the light of the detail-rich body of counseling research literature. The purpose here is to concretize and test the largely philosophical, meta-empirical propositions and perspectives that I have thus far set forth in this paper and to assess the value of the relationship-centered perspective for further illuminating empirical findings and providing direction for future inquiry and research. In this closer examination of relevant empirical research, especially process research, I will also address the second purpose of my paper, namely to highlight the joint interaction of the relational and technical components of counseling in the light of both empirical and meta-empirical perspectives.

Relationship-Centered Counseling: Process, Change, and Outcome

There is now a substantial body of process and outcome research in counseling that

reflects increasing sophistication in the use of the recording of actual counseling events and of applying quantitative/statistical and qualitative methodologies (Greenberg & Pinsof, 1986; Hill & Corbett, 1993; Hill, Nutt, & Jackson, 1994; Toukmanian & Rennie, 1992). For the purposes of this paper I will concentrate on selected work from prominent researchers and research programs that provide particularly rich accumulations of data and organized findings regarding counseling process, client change, therapeutic outcome. From this body of research I will highlight findings that are especially relevant for testing, clarifying, and concretizing the propositional principles of the relationship-centered perspective.

Counselor Intentions: Clara Hill and Jack Martin

Clara Hill and her colleagues continue to pursue an evolving research program that is especially detailed in examining specific events and patterns of the counseling process. With the development of instruments to measure therapist intentions, therapist response modes, client reactions, and client behavior, Hill and her associates (Hill, 1992a; Hill, Helms, Spiegel, & Tichenor, 1988; Hill, Helms, Tichenor, Spiegel, O'Grady, & Perry, 1988; Hill & O'Grady, 1985) have a developed a model of in-session counselor-client interaction at the level of counselor-client speaking turns. Each speaking turn is comprised sequentially of: (a) a counselor intention or rationale for what the counselor wants to accomplish (which itself is influenced by the previous client response as well as various counselor characteristics); (b) a counselor response characterized by a large range of verbal and nonverbal interventions; (c) client reactions representing the client's affective-cognitive experience to the counselor's response; and (d) client behavior signifying major categories of how clients overtly respond in the speaking turn. The counselor-client process elements of this model have also been studied along with measures of other therapeutic factors (e. g., clients' pretherapy symptomatology, counselors' theoretical orientation, counselor and client covert reactions, and session outcome) (Hill, Corbett, Kanitz, Rios, Lightsey, & Gomez, 1992; Hill, O'Grady, Balenger, Busse, Falk, M. Hill, Rios, & Taffe, 1994; Hill, Mahalik, & Thompson, 1989; Hill, Thompson, Cogar, & Denman, 1993). The results of this work display an enlightening but complicated array of patterns and interactions that Hill (1992b) notes she herself "rarely remembers" (p. 745). However, emerging from these data are a number of observation-based general principles that help to elucidate counselor-client variables that mediate effectiveness in counseling.

Counselor intentions (i. e., immediate, speaking turn intentions), which provide a "more in-depth representation of counselor behavior" (Hill & O'Grady, 1985, p. 3) than counselor response modes, appear as particularly important variables in accounting for client helpfulness ratings and client reactions (Hill & O'Grady, 1985; Hill, Helms, Tichenor, Spiegel, O'Grady, & Perry, 1988). The same intention can be expressed with generally equal effectiveness through different response modes (e. g., the counselor's intention to have the client explore feelings can be conveyed equally well through such response modes as an open question, paraphrase, interpretation, or confrontation) (Hill & O'Grady, 1985; see also J. Martin et al., 1989). Relevant to the relationship dimension of counseling, counselor

intentions to provide a warm, supportive, and empathic environment and instill hope in the client appear to lead to client reactions of feeling supported and understood. This finding is generally consistent with data showing that client perceptions of counselor competence are characterized by a relatively high client ratings for counselor facilitating style (e. g., caring), followed by a lower but still substantial ratings for facilitating interventions (e. g., exploration) and facilitating effect (e. g., gain) (Thompson & Hill, 1992). Both counselors and clients consider very helpful those interventions (e. g., paraphrase, interpretation, confrontation) that are intended to help the client explore feelings and behavior (Hill & O'Grady, 1985). However, clients consider their own steps toward positive change (e. g., feeling unstuck, achieving better self-understanding, learning new behaviors, and accepting responsibility appear)--as these are related to counselor task-like interventions--are more helpful than feeling-related reactions (Hill, Helms, Spiegel et al., 1988). Taken together, these results are generally consistent with other findings that facilitative conditions are necessary but not sufficient conditions for client change. Nonetheless, the complexity and ambiguity of these data on connections between counselor intentions, counselor response modes, and client reactions do not yet yield a clear view of how the facilitative/relationship conditions and task intentions/behaviors of the counselor interact in affecting positive client outcome (Hill, Helms, Spiegel et al., 1988, p. 33).

Another question with regards to the operation of intentions in counseling is how well clients and counselors can perceive each other intentions (i.e., "match" them). Evidence indicates that clients are able to discern counselor intentions about half the time for assessment, support, and restructuring intentions (Hill, et al., 1993; see also J. Martin, W. Martin, Meyer, & Slemon [1986] for similar findings). Although matches on such intentions as assessment and exploration have different associations with perceived helpfulness (e. g., clients see assessment intentions as generally unhelpful and therapists see exploration intentions as generally helpful), there appears to be no overall association between the ability of clients to match counselor intentions and session outcome. The data generally suggest that except for possible negative reactions to too much therapist assessment, "if therapists are being facilitative, clients may not notice so much what their therapists are doing as what they themselves are experiencing" (Hill et al., 1993, p. 286). Indeed, the level of clients' experiencing (low or superficial to high or involved) appears to act as an influential context in counseling. High levels of client experiencing are generally associated with client perceptions of helpfulness for almost any counselor response mode, while low levels of client experiencing require mediating counselor intentions of facilitating exploration and giving support if they are to be perceived as helpful (Hill, Helms, Tichenor, et al., 1988).

Jack Martin and his colleagues (J. Martin, 1984; J. Martin et al., 1986) have also examined the role of counselor intention with a counseling process model similar to Hill's. Both Hill and Martin are in agreement that intentions are cognitive variables. However, Martin's (1992b, 1994; Martin et al., 1986) explicit cognitive orientation (in contrast to Hill's more client-centered roots) is evident in his inclusion of a separate process category of client cognitive process that operates between client perception (similar to Hill's client

reaction) and client behavior. Furthermore, Martin's intention categories have strong, explicit cognitive slants. In this light, it is not surprising that his findings indicate that counselors have generally high levels of cognitive intentions such as helping clients make connections across information, monitor personal thoughts, consider new information, and retrieve relevant information from memory (J. Martin et al., 1986). However, when using Hill's list of intentions in their research, Martin and his colleagues (J. Martin et al., 1989) found not only that counselors tend to use relatively high levels of feeling intentions, followed by clarifying and giving information intentions, but also that such intentions can be conveyed through a variety of response modes (similar to Hill's findings) and evoke a variety of client cognitive operations. This is not to say that there are no regular associations between intentions and response modes. Certain intention-response patterns do occur in process research; furthermore the quality of counselor responses also affect client perceptions of counselor intentions in certain cases (Uhlemann, Lee, & J. Martin 1993). As note above, intentions generally have a larger effect on outcome than types of response modes, but an intention is more likely to have its full force when conveyed in humanly expert response modes consistent with the intention.

Despite evidence for distinctive patterns of counselor intentions, counselor response modes, and client reactions, there still occurs substantial variability among counselor-client intentions/behaviors on the one hand and counselor-client reactions/behaviors on the other. This has led Martin and his associates (J.Martin et al., 1989) to wonder if a solely empirically based social science of counseling will ever succeed in capturing fully what they term the Shakespearean intricacies of counseling dialogue. This complex, indeterminate, art-like quality of counseling dialogue that underlies the expression of counselor and client intentions is consistent with the relationship-centered principle that counseling requires a comprehensive epistemology that embraces the idiosyncratic creativity of art as well as scientifically based technical regularities that are the tools of creative action. I will return to a discussion of this issue of idiosyncratic creativity at greater length below in a section on the influence of the individual therapist and individual counselor-client dyad.

Although research on counselor intentions is not without definitional and methodological problems (Hamer, 1995), patterns of intentions that do appear in counseling process research generally provide substantial evidence that counselors intentionally use an eclectic or integrative mix of relationship and task/technique components. For example, counselors have been shown to place a relatively high emphasis on (a) facilitative or relationship-like intentions such as giving support and encouraging the expression and acceptance of feelings, (b) task- or directive-like intentions such as giving feedback on maladaptive behaviors, challenging unhelpful beliefs and behaviors, and developing new attitudes and behaviors for change, and (c) intentions that might be construed as both facilitative and task-oriented such as encouraging insight and clarifying ambiguous communications (Hill & O'Grady, 1985; Hill, Helms, Tichenor, et al., 1988). Among these intentions, those to provide support and facilitate change appear to stand out, especially in conditions of low client experiencing, as contributing significantly to immediate client

reactions of being supported and progressing in therapeutic work (Hill, Helms, Tichenor, et al., 1988). Findings such as these, although part of a much larger and complicated set of interactions, are consistent with a relationship-centered counseling perspective that integrates the relationship and task/technique as major, necessary domains for effective therapeutic work.

These results and their congruence with a relationship-centered perspective are not remarkable or surprising in themselves. However, they take on added significance when we note that immediate counselor intentions may be understood as micro-representative of the in-depth (ontological), purposive (teleological), and on-going relational nature of counseling. Immediate counselor intentions are in-process expressions of the prevailing humanistic intention of the in-depth therapeutic relationship grounded in core relational humanness and directed toward the enhanced humanization of the client. Moreover, these immediate, therapeutic intentions are inherently relational not only because they are informed ontologically and teleologically by inherently relational humanness but also because they are idiosyncratically shaped by the continuous flow of counselor-client dialogue, deriving specific definition and meaning only in the context of the client's needs, interests, intentions, and behaviors.

Therapist intentions stand out as crucial events shaping the therapeutic force of the counselor-client work. They are formed out of and incorporate affective-cognitive reactions to distal counselor and client variables (e. g., personality and demographic variables), intermediate and immediate variables (e. g., family conflict, anger, weariness, confusion), immediate interactions (e. g. resistance, compliance, questioning, disclosure), and in-depth core values and beliefs about being and becoming truly human (enhanced self-understanding, freedom of choice, relational competence, ethical responsibility, etc). Because immediate counselor intentions may be broadly characterized as relationship oriented, task/technique oriented, or a combination of the two, they are also an important focal point for understanding how relational/humanistic and task/technical components interact in process to give rise to therapeutically effective counselor responses and behavior. If such intentions are to be idiosyncratically effective across the unlimited variations on client interest, needs, and behaviors, the therapeutic question or challenge for the counselor at each moment is how to form her or his immediate intention so as to effectively blend the in-depth humanizing values of counseling with a recognition of the client's immediate experience and needs as these relate to her or his positive development and resolution of problems.

Process research has thrown considerable light upon the general form and varying effects of specific immediate counselor intentions. However, current intention categories and investigative methods in this research tend (a) to separate relationship and task oriented intentions, making their joint interaction and effect more difficult to discern; (b) to overlook the operation of the global, in-depth intention of humanization, thereby slighting how values related to this prevailing intention affect and interact with immediate intentions; (c) to overemphasize the cognitive aspect of intentions, thereby missing the powerful affective and

attitudinal forces that drive and shape intentions. Inquiry that includes these elements of intention formation may help toward (a) clarifying the joint interaction of relational/humanistic and task/technique aspects of counseling, (b) accenting the in-depth humanizing purpose of counseling and linking it more effectively with specific task and technical intentions, and (b) tapping strong, motivating feelings that can energize the implementation of intentions.

Counselor Impact by Sessions: William Stiles and Robert Elliott

Whereas Hill and her colleagues have concentrated primarily on the immediate, speaking turn process in counseling, William Stiles, Robert Elliott, and their colleagues (Elliott, 1985; Elliott, Shapiro, Firth-Cozens, Stiles, Hardy, Llewelyn, & Margison, 1994; Elliott & Wexler, 1994; Stiles, 1980; Stiles, Reynolds, Hardy, Rees, Barkham, & Shapiro, 1994; Stiles, Shapiro, & Firth-Cozens, 1988, 1990; Stiles & Snow, 1984) have examined counseling process primarily in terms of counseling interaction and impacts by sessions. Stiles has developed and used the Sessions Evaluation Questionnaire (SEQ) to measure the Depth/Value (i. e., session power and value) and Smoothness/Ease (i. e. session comfort and safety) of counseling sessions, dimensions which he generally equates respectively with the "socioemotional" (relationship) and task dimensions of counseling (Stiles et al., 1988). Elliott has developed and used the Helpfulness Scale and Session Impact Scale (SIS) to measure the helping and hindering impacts of counseling sessions (the former is also used for measuring immediate process impacts) (Elliott & Wexler, 1994). Work with the SIS has turned up strong evidence that helpful impacts fall into the two major distinctive but overlapping categories of relationship and task impacts. The depth/smoothness indexes of the SEQ and the helpful impact indexes of SIS have been found to be highly correlated (Stiles, et al., 1994), indicating substantial overlap in clients' and counselors' perceptions of the depth/power and smoothness/comfort of counseling and their perceptions of relational and task helpfulness in counseling process.

Stiles et al. (1988) additionally found that a simple three-item measure (skillful-unskillful, trustworthy-untrustworthy, warm-cold) for a "Good Therapist" index was also highly correlated with the SEQ and SIS, suggesting that clients' descriptions of counselors' depth, smoothness, and helpfulness are closely tied to their overall evaluation of the counselor's relational and skill competence (Stiles et al., 1994). Moreover, in counseling dyads in which the client gave the counselor a high "Good Therapist" rating across sessions, fluctuations in perceptions of depth and smoothness did not affect this rating. From this it appears that if clients perceive a counselor to be relationally and technically competent overall and generally helpful, variations in their judgments about other aspects of counseling do not appreciably affect their overall positive judgment. Additional evidence from Stiles et al.'s (1988) research suggests that clients may experience cognitive-behavioral counseling as smoother (i. e., relationally more comforting) and emotionally more satisfying (i. e., evocative of feeling more positive) than relationship-oriented counseling. At the same time both forms of treatment were found to equally effective in terms of outcome when delivered

by therapists experienced in the respective approaches, a result that is also reflected in the lack of difference in clients' perceptions of the depth (i. e., power and value) of the two treatments.

These results not only support the a view of counseling according to relationship/humanistic and task/technical dimensions but also suggest that these dimensions are inseparable in practice for effective counseling. Furthermore, the qualitative, influential connection of these two dimensions appears to take on a special character in light of the finding that clients perceived cognitive-behavioral therapy delivered by experienced therapists as relationally more comforting (smoother) and affectively more satisfying than relationship/exploratory-oriented counseling, although not more valuable or powerful (i.e., not deeper). From this it appears that the bonding and supportive aspect of relationship conditions (especially in exploratory-oriented expressions) may operate most effectively not as a stand-alone form of counseling but as extended in the expert application of cognitive and behavioral tasks/techniques.

It is also noteworthy that relationship-oriented counseling that is also highly exploratory in nature--a common characteristic of relationship-type responses such as depth empathy--may well be perceived as more relationally stressing than task-oriented cognitive-behavioral work, although there is no difference in perceptions of their power or depth. I suggest that this result indicates that the therapeutic relationship is not comprehensively captured simply in terms of the client's socioemotional ease (smoothness). Instead, it is more properly construed as the value- and affect-laden humanizing intention that is expressed in disquieting challenges to human growth as well as comforting assurances. Moreover, this in-depth humanizing intention, which is the grounding and directional core of therapeutic relationship, is concretized in the therapeutic process both in relationship-oriented facilitative responses (e. g., support, warmth, understanding, and empathy) and in task/technical responses and work. Thus it is not surprising that clients may experience in-depth relational/exploratory work as discomforting at times and expert task/technical work as relationally satisfying as well as concretely helpful. Indeed clients' overall perception of the "Good Therapist" (skillful, trustworthy, warm, helpful) appears to remain quite steady despite fluctuating perceptions of specific measures of depth, smoothness, and helpfulness. The perspective of relationship-centered counseling, which integrates in-depth therapeutic relationship with task and technical instrumentalities suggests that impact research may profit by a reconceptualization of relationship that includes not only the elements of comforting bonding but also relational challenge.

Such a rethinking of relationship also implies a rethinking of tasks and techniques as the instrumental extension of relationship and therefore, insofar as they are therapeutic, inherently infused with the relational component (see, e. g., Arnkoff, 1983; Safran & Segal, 1990). In line with this kind of relationship-centered rethinking, it further suggested that the study of perceived impacts would benefit by identifying and using impact indexes that comprehensively reflect the interactive combination as well differentiation of

relational/humanistic and technical/task elements. A recent promising step in this direction is Elliott et al.'s (1994) elaboration and use of Comprehensive Process Analysis (CPA). In this case, the focus of analysis is not a whole counseling session but a small therapy event (see discussion below on counseling episodes). The method of analysis is a qualitative examination of a therapeutic event in three major domains--background, key counselor responses, and effects--each consisting of several levels or aspects. Using this method to examine "insight events" in cognitive-behavioral and psychodynamic-interpersonal approaches, Elliott and his colleagues discovered 19 general themes that occur in insight events across both approaches, with another 22 themes and variables occurring differentially in the each of the approaches. An examination of the 19 common themes provide strong evidence of relational variables, task events, and counselor-client mutuality or relationality across the whole event. Despite differences between the two approaches to the insight event, the common themes allowed the researchers to propose a 5-step process model that is generic to both approaches.

An additional finding of some particular interest to the purposes of this paper was the importance of counselor interpretation in both approaches (see also Clark, 1995; Friedlander, Thibodeau, & Ward, 1985; Hill, Helms, Tichenor, et al., 1988; Luborsky et al., 1988). An examination of examples of actual counselor interpretations that are presented in Elliott et al.'s (1994) published report suggest that what the authors are calling interpretation in the psychodynamic-interpersonal approach is almost indistinguishable from what has been variously termed advanced, depth, or additive empathy in humanistically oriented approaches (see, e. g., Carkhuff, 1969; Egan, 1994; Ivey, 1994). On the other hand, the interpretation in the cognitive-behavioral example is clearly a counselor assertion or judgment (an "I-statement") affirming (reassuringly to be sure) a particular client perception. Clark (1995) has discussed the wide variations in how interpretation is defined among practitioners and researchers and noted that an essential characteristic of all definitions is the introducing of the client to a new frame of reference by way of the counselor imparting an alternative perspective. If this is correct, then Elliott et al.'s (1994) research suggests that an interpretative-type counselor response may effectively take either a relationship-facilitative form or a directive-cognitive form--and probably other forms too. In this light interpretation appears not as a univocal concept or response mode, but an important perspective-shifting response that may be primarily relationship-oriented or cognitively/behaviorally oriented or a combination of both. From a relationship-centered perspective interpretation is understood as a counselor intention-response that (a) conveys the prevailing in-depth intention toward client humanization (b) through process intentions involving specific beneficial shifts in client perspective (c) via diverse response modalities reflecting different combinations of facilitative and task oriented responses.

Bachelor's (1995) qualitative study of the therapeutic alliance also highlights the joint occurrence of relational and task elements in client perceptions of the alliance across therapy sessions. She found evidence of three types of client-perceived alliance, ranked in the following order: nurturant (46%), characterized primarily by facilitative conditions in the

counselor-client bond; insight-oriented (39%), characterized by attention to self-understanding; and collaborative (15%), characterized primarily by the client's active involvement in therapeutic work. Despite the distinctive qualities of three types of alliances, significant relationship (e. g., trust) and task elements (e. g., skillfulness) occurred in all three.

Results of the Elliott et al. (1994) and Bachelor (1995) studies are consistent with the integrative perspective of relationship-centered counseling. In the relationship-centered perspective, as in these two studies, the relationship/humanistic and task/technique dimensions of counseling are interwoven in varying degrees and modes of expression according to the particular characteristics of the counselor and client (e. g., developmental background, current needs, philosophical outlook, theoretical orientation). Therapeutic tasks occur effectively only in conjunction with a pervasive (although not necessarily explicit) relational component conveying the counselor's humanizing values and intentions. And relational components find effective expression in exploratory and change tasks/techniques suited to the client's distinctive needs. Although these two qualitative studies were remarkably rich in content and method, the relationship-centered perspective would suggest that a key context and process variable that is missing is that of the counselors' and clients' values. Previous research would lead us to expect that the counselors' values would be highly humanistic (Jensen & Bergin, 1988; Kelly, in press). The inclusion of the values domain (in quantitative assessment and qualitative coding) would help to illuminate the deep prevailing intention that guides therapists of all approaches and to distinguish this global intention from process intentions that shift operationally across the complex movement of counseling.

Process Episodes: Laura Rice and Leslie Greenberg

Therapeutic episodes (sometimes called therapeutic tasks or therapeutic events) are a midlevel unit of process analysis between immediate counselor-client speaking turns and whole sessions. They "are meaningful units of therapeutic interaction which, according to the therapeutic approach being used, are designed to achieve an intermediate therapeutic goal" (Greenberg, 1986a, p. 5; see also, Greenberg, 1986b, 1991, 1992; Rice, 1992; Rice & Greenberg, 1984; Greenberg, Rice, & Elliott, 1993; Wiseman & Rice, 1989). The Elliott et al. (1994) study reported above is an example of research focusing on the episode level that shows a substantial blend of relationship and task events. Greenberg (1986a, 1986b) conceptualizes therapeutic episodes or events as part of a hierarchical structure in which the episode holds a midlevel position between the larger context of the counselor-client relationship and serves as the context for a speech act. The value of this model is that it incorporates relationship variables into all psychotherapy and counseling research (see, e. g., Greenberg & Dompierre, 1981). In this approach relationship and tasks/techniques are not studied in contrast to one another (e. g., by comparing a humanistic and behavioral approach to some problem) but are included as integral components of process and outcomes studies across all theoretical approaches. This model clearly affirms the abiding necessity of the

therapeutic relationship for episode effectiveness. Clearly, this means that the relationship has an effect intrinsic to the effective operation of the episode activities. Indeed, the episode-intrinsic operation of relationship operations are made explicit in several examples of key therapeutic episodes described by Greenberg et al. (1993).

In light of the intrinsically pervasive character of the therapeutic relationship, I would suggest that rather than envision relationship as a qualitative context (Greenberg, 1986b) that surrounds, so to speak, the episode activities or view episodes as task activities presupposing a relationship context, it is preferable to conceptualize relationship as the animating core of episodes--indeed of whole sessions and the entire course of therapy. Kivlighan and Shaughnessy (1995) provide evidence that the therapeutic alliance in effective counseling builds linearly across the whole course of counseling and this linear increase is substantially related to outcome (an process-outcome association previously suggested by Greenberg [1994]). This is consistent with (although it certainly does not prove) the notion of the pervasive quality of the relationship and the occurrence of specific relationship elements and events (e. g., facilitative and supportive responses) as integral aspects of episodes. This is exactly what Elliott et al. (1994) found in their study of insight episodes and what shows up in Greenberg et al.'s (1993) description of specific treatment tasks.

Rice (1983) has described relationship in a manner that begins to bridge relationship and task components within the relationship dimension itself. Working from the client-centered tradition, Rice conceptualize relationship as having a primary facilitative aspect (e. g., unconditional positive regard) and a secondary task-relevant aspect. The latter consists not of therapist-initiated tasks but of therapist-provided conditions that are optimally facilitative of client initiated tasks. Rice stresses that task in this sense is not a counselor task or technique but a special kind of relationship variable involving a different kind of interactional focus for client tasks within the ongoing therapeutic relationship.

Greenberg et al. (1993) have further elaborated the integration of relationship and task components in a process-experiential approach to therapy. This approach specifically and prominently incorporates (a) therapeutic relationship principles reflecting primary contributions from Rogers' facilitative conditions and the collaborative bonding principles of the alliance conceptualization, and (b) task principles in which the therapist is process-directive at times (e. g., using two-chair and empty-chair enactments related to client tasks) within an on-going client-centered, facilitative relationship. This approach is very similar in key respects to what I have proposed in relationship-centered counseling (Kelly, 1994). The process-experiential approach strongly affirms the necessity and primacy (at least the "logical and temporal" primacy) of the therapeutic relationship and describes relationship conditions in detail both in their own right and as an on-going components of therapeutic tasks. Counselor process-directiveness, always in conjunction with an on-going facilitative attitude, is explicitly incorporated and described within focused therapeutic tasks.

However, it strikes me that Greenberg, Rice, and Elliott may be too tentative with the

use of counselor directiveness and counselor technique. I think this is so because their implicit concept of the counselor-client interaction is decidedly individual-to-individual rather than progressively relational and intersubjective. They resist incorporating any counselor activity that may be construed as an intrusion from the counselor's perspective into the client's experience. This is understandable, and I certainly agree. But when the counselor-client interaction is understood as inherently relational so that the counselor and client are operating and negotiating not in and across two individual, separate worlds but instead are forming a relational world, then the notion of counselor directiveness is not necessarily an intrusion from outside the client's world but a response from within the increasing shared counselor-client world. This in-depth relational perspective on client-counselor interaction opens the door to the inclusion of a wide range of cognitive and behavioral techniques while preserving the key principles of a predominantly and comprehensively humanistic counselor stance with the client. The fundamental principles and operations of this stance are outlined in the first part of this paper and described in detail elsewhere (Kelly, 1994).

Individual Counselors and Counselor-Client Dyads

Process research is concerned predominantly with discovering distinctive patterns of counselor-client interactions in association with therapeutic outcome across different counselors, clients, and counselor-client dyads. Although such patterns and process-outcome connections do occur, they do not always occur predictably across different counselors, clients, and counselor-client dyads; that is to say, there is considerable variability among individual clients and counselors and each counselor-client dyads with respect to the effect of various process patterns (see, e. g., Friedlander et al., 1985; Hill (1989); Hill, Helms, Spiegel, et al., 1988; Kiesler, 1966; Lambert, 1989, 1992; Stiles et al., 1990; Strupp, 1980a, 1980b, 1980c, 1980d). Lambert's (1989) review of a selected body of research led him to conclude that "in addition to clinical wisdom and anecdotal evidence, there is empirical support for the notion that the individual therapist can have a substantial effect on process and outcome, one that often exceeds that attributable to technique" (p. 480) across counseling modalities, training, experience, and even efforts to minimize individual differences in research. Parallel to this individual therapist effect, Friedlander et al. (1985) found evidence to propose that each counselor-client dyad creates a culture unique to itself and evaluates their therapeutic interaction in light of their particular dyadic culture. This led them to point out the potential loss of information that occurs in relying solely on group designs in process-outcome research and to recommend a mixture of N-of-1 designs with group comparisons. It is in the unique qualities of each counselor-client interaction, especially at the episodic level, that Friedlander (1992) affirms the inherent "art" aspect of psychotherapy--a perspective that Hill (1992b) acknowledges as consistent with her own systematically empirical approach to counseling process.

The relationship-centered approach explicitly incorporates art and its particular epistemological perspective as legitimate and indispensable to both the understanding and practice of counseling. In this light, art does not refer simply to a kind of casual or

spontaneous practice of counseling as contrasted with a scientifically and technical approach. Art instead represents a legitimate meta-empirical domain of reality and knowing and an equal partner with science in understanding and practice in the distinctively human realm of existence. Art, in its full and genuine sense, does not represents a way of knowing and doing that is nonscientific or nontechnical, or worse, anti-scientific or anti-technical. "Gullibility, not art, is the opposite of science, and ineptitude, not art, is the opposite of technique" (Kelly, 1994, p. xi). The widespread evidence of individual therapist effect (Lambert, 1989) does not negatively signify a dark realm yet to be discovered by empirical, scientific methods (although science certainly has much more to uncover) but positively represents the indeterminate and free domain of a relationally grounded human creativity that finds expression in the never completely predictable development of personal subjectivity and intersubjective relationship. Indeed, science and technical expertise are in large part a manifestation of human creativity systematically grappling with the givens of which it is a part. At the same time, this creativity has in-depth ontological roots that define humanness and its distinctive qualities in ways that are outside the epistemological limits of science and its strictly positivistic empirical methods.

Thus, the meta-empirical, transcendent dimension of existence--art, in-depth relational humanness, and spirituality--characteristic of being and becoming human have not only "temporal and logical priority" (see Greenberg et al., 1993, p. 101) over technical and scientific principles but also ontological priority. With respect to counseling, this means that the authentic therapeutic process is always primarily human and relational and secondarily (but necessarily) technical. The humanizing purpose of counseling cannot be accomplished by a reversal of the priority order of humanistic and technical components (nor, it should be added, by a neglect of the technical expertise that is inherently characteristic of being human). I suggest that it is this creatively humanizing ground and purpose of therapy--expressed in and through the unique human relationality of each counselor-client dyad and distinctive human subjectivity of each client and counselor--that fundamentally accounts for the phenomenon of individual counselor and client-counselor dyad effects.

Process of Client Change: James Prochaska

Counseling is a process of personal client change grounded in and facilitated by an evolving therapeutic relationship that is humanly and technically modulated according to the client's readiness to change. Prochaska and his colleague (DiClemente, 1991; Prochaska, 1979; Prochaska, 1991; Prochaska & DiClemente, 1984; Prochaska, DiClemente, & Norcross, 1992) have developed a research-based, transtheoretical model for understanding personally intentional change, both self-initiated and professionally assisted. The model contains five stages of change (precomtemplation, contemplation, preparation, action, and maintenance) representing persons' increasing readiness to change. This readiness ranges from an ineffective, unaware wish to change, through growing awareness, serious reflection, commitment, initial action, and committed action, to continuing efforts to consolidate change gains and prevent relapse (Prochaska et al., 1992). The relevance of this model for

counseling and psychotherapy is found in the importance of matching the mode of therapeutic activity with the client's stage of readiness for change. Based on theoretical and empirical studies, Prochaska et al. (1992) specify 10 therapeutic processes (helping relationships, consciousness raising, self-revaluation, self-liberation, dramatic relief, social liberation, environmental reevaluation, reinforcement management, contingency management, and stimulus control) that recur repeatedly across all different theoretical approaches to therapy and a great diversity of problems. Their research indicates that these processes--an eclectic representation of insights from psychoanalysis, behaviorism, cognitive therapies, and humanistic-existential therapies--occur in cyclical patterns that differentially emphasize and blend relationship, exploration/consciousness-raising, and action strategies across the different stages of the therapeutic change. Among these processes and across three types of problems, Prochaska and DiClemente (1985) found that helping relationships, consciousness-raising, and self-liberation were the top three ranked processes.

The identification and matching of change stages and common therapeutic processes provide a well-founded basis for therapeutic integration. Such an integration, especially combined with evidence that relationship/exploratory-type processes are generally most highly ranked, is consistent with a relationship-centered perspective. I propose that the relationship-centered perspective offers a philosophical rationale for theoretically synthesizing the change processes identified by Prochaska and his colleagues (see Prochaska et al., 1992). The Prochaskan model of stages of change and related therapeutic processes may be seen as an empirically based explication and specification of in-depth human processes in which distinctively human qualities and technical instrumentalities are inextricably interwoven and developed within an inherently relational dynamic.

Conclusion

I have proposed a relationship-centered perspective in counseling and psychotherapy that organically integrates the humanistic/relational/artistic and the scientific/technical domains, with the former constituting the primary ground, purpose, and process core of therapy and the latter constituting the instrumental extension of the former. This perspective is based on a comprehensive empirical and meta-empirical epistemology, in which philosophical, theoretical, and empirical lines of reasoning and evidence converge to elucidate and connect in-depth qualities of distinctive relational humanness and the cognitive and behavioral events that concretize intersubjective and personal humanness. Evidence from several prominent research programs have been presented to argue that this relationship-centered perspective is not only consistent with research but also provides a philosophical/theoretical base to undergird this research. It has been proposed that the relationship-centered perspective can benefit research by providing a rationale for research that always includes the interaction of relationship and technique, rather than a contrast of the two. Further, it has been proposed that the pervasive force of relational humanness in counseling is conveyed by prevailing therapeutic values, beliefs, and intentions, and that these variables might be beneficially included more often in process and outcome research. Finally, the

relationship-centered counseling perspective provides an explicit philosophical remedy for practitioners and researchers especially at the far ends of the humanistic-technical divide to overcome their reluctance to fully integrating these two domains in practice and inquiry.

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